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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	-	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar	e the name that is on government-issued ire identification (for nple, your driver's ise or passport).	Alisha First name	First name
			Middle name	Middle name
	iden	g your picture tification to your ting with the trustee.	Scholz Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ide your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security ber or federal vidual Taxpayer tification number	xxx-xx-5228	

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Case number (if known)

Debtor 1 Alisha M Scholz

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs		
5.	Where you live	5205 N. Lake Street	If Debtor 2 lives at a different address:		
		McHenry, IL 60050 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
	McHenry County		County		
! :		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Case number (if known) Debtor 1 Alisha M Scholz

ar	Tell the Court About	Your E	3ankruptcy Ca	ise				
7.	The chapter of the Bankruptcy Code you are				of each, see Notice Required		2(b) for Individuals Filin	ng for Bankruptcy
	choosing to file under		■ Chapter 7					
			Chapter 11					
		_	Chapter 12					
			Chapter 13					
I will pay the entire fee when I file my petition. Please check with about how you may pay. Typically, if you are paying the fee yourself, order. If your attorney is submitting your payment on your behalf, you a pre-printed address.			he fee yourself, you may	y pay with cash, cashie	r's check, or money			
					tallments. If you choose s (Official Form 103A).	this option, sign and att	ach the Application for	Individuals to Pay
			but is not requapplies to you	uired to, waive y ur family size an	lived (You may request the your fee, and may do so on the you are unable to pay to chapter 7 Filing Fee Waiv	only if your income is let the fee in installments).	ss than 150% of the off If you choose this optic	ricial poverty line that on, you must fill out
P. Have you filed for ■ No. bankruptcy within the								
	last 8 years?	ПΥ	es.					
			District		When _		Case number	
			District		When _		Case number	
			District		When _		Case number	
10.	Are any bankruptcy	■ N	0					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	ПΥ	es.					
			Debtor			R	elationship to you	
			District		When	C	ase number, if known	
			Debtor			R	elationship to you	
			District		When	C	ase number, if known	
11.	Do you rent your	□N	lo. Go to li	ine 12.				
	residence?	■ Y	es Has yo	ur landlord obta	ained an eviction judgmer	nt against you and do yo	ou want to stay in your	residence?
				No. Go to line	12.			
			_		itial Statement About an I	Eviction Judgment Agai	inst You (Form 101A) a	nd file it with this

Document Page 4 of 55 Case number (if known) Debtor 1 Alisha M Scholz Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

INO.	

Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Alisha M Scholz Document Page 5 of 55

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 55 Case number (if known) Debtor 1 Alisha M Scholz Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion \$0 - \$50.000 estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Alisha M Scholz Signature of Debtor 2 Alisha M Scholz Signature of Debtor 1 Executed on March 9, 2016 Executed on

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1 Alisha M Scholz Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ David L	Stretch	Date	March 9, 2016			
Signature of	Attorney for Debtor		MM / DD / YYYY			
David L. S	stretch					
The Law C	Office of David L. Stretch					
	5447 W. Bull Valley Road McHenry, IL 60050-7410					
Number, Street,	City, State & ZIP Code					
Contact phone	815-578-0055	Email address	stretchlaw@gmail.com			
6228693						
Bar number & S	tate					

		DOCUM	<u>-ni Pade 8 di 55</u>	
Fill in this infor	mation to identify your	case:		
Debtor 1	Alisha M Scholz			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	10,620.14
	1c. Copy line 63, Total of all property on Schedule A/B	\$	10,620.14
Pai	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	19,500.41
	Your total liabilities	\$	19,500.41
Pai	rt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,385.49
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,618.00
Pai	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	personal,	family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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Page 9 of 55 Case number (if known) Debtor 1 Alisha M Scholz

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

4,613.30 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill in thi	is inform	nation to identify your case	and this filing:	en Paue 10 01 55		
Debtor 1		Alisha M Scholz				
Dahtar 0		First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if f	filing)	First Name	Middle Name	Last Name		
United St	tates Ban	nkruptcy Court for the: NOF	RTHERN DISTRICT	OF ILLINOIS		
Case nur	mher					☐ Check if this is an
Oasc Hui						☐ Check if this is an amended filing
Officia	al For	m 106A/B				
Sche	edule	A/B: Proper	tv			12/15
hink it fits nformatio Answer ev	best. Be n. If more ery quest	as complete and accurate as space is needed, attach a sep ion.	possible. If two mar arate sheet to this fo	once. If an asset fits in more than one ied people are filing together, both are orm. On the top of any additional pages at the You Own or Have an Interest In	equally responsible for s	supplying correct
		-	<u> </u>	, building, land, or similar property?		
		, , ,	oot in any roomanio	, bunding, land, or climal property.		
	Go to Part	the property?				
in res.	where is	the property?				
Part 2:	Describe Y	our Vehicles				
B. Cars, v □ No ■ Yes	·	cks, tractors, sport utility v	vehicles, motorcyc	eles		
3.1 Ma	ake: C	Chevrolet	Who has an inte	erest in the property? Check one		claims or exemptions. Put red claims on Schedule D:
Мо	odel: T	railblazer	■ Debtor 1 only	1		aims Secured by Property.
Ye	ear: 2	005	Debtor 2 only	1	Current value of the	Current value of the
•	proximate her inform		Debtor 1 and	•	entire property?	portion you own?
Lo	cation:	5205 N. Lake Street, IL 60050	_	of the debtors and another s is community property ns)	\$3,032.00	\$3,032.00
Example No ☐ Yes 5 Add the pages Part 3: Description:	les: Boats he dollar s you hav	s, trailers, motors, personal v	watercraft, fishing very watercraft, fishing v	entries from Part 2, including any	entries for	\$3,032.00 Current value of the portion you own? Do not deduct secured
House	hold an	ods and furnishings				claims or exemptions.
). House	noiu go	ous anu iurinsinnys				

Examples: Major appliances, furniture, linens, china, kitchenware

■ No

Official Form 106A/B Schedule A/B: Property

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Debtor	1 Alisha M Scholz		Document	Page 11 of 55 Case number (if known)
□ Y	es. Describe				
7. Elect	mples: Televisions and radi including cell phone			oment; computers, printers, scanners; music	collections; electronic devices
_	es. Describe				
Exai	other collections, me			oks, pictures, or other art objects; stamp, coi	n, or baseball card collections;
■ N □ Y	o es. Describe				
Exai	musical instruments	c, exercise, and	other hobby equipment;	bicycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
10. Fire	es. Describe				
Exa ■ N	amples: Pistols, rifles, shoto	guns, ammunitio	n, and related equipmen	t	
■ N	amples: Everyday clothes,	urs, leather coat	s, designer wear, shoes	, accessories	
■ N	amples: Everyday jewelry, o	costume jewelry,	engagement rings, wed	ding rings, heirloom jewelry, watches, gems,	gold, silver
<i>Exa</i> □ N	n-farm animals amples: Dogs, cats, birds, h o es. Describe	norses			
			s, 2 dogs, 1 rabbit, 1 Lake Street, McHen		\$0.00
■ N	-		u did not already list, i	ncluding any health aids you did not list	
	dd the dollar value of all c r Part 3. Write that numbe			ny entries for pages you have attached	\$0.00
	Describe Your Financial Ass				
Do you	own or have any legal o	equitable inter	est in any of the follow	ring?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cas <i>Exa</i> □ N	amples: Money you have in	your wallet, in y	our home, in a safe depo	osit box, and on hand when you file your peti	tion

Official Form 106A/B Schedule A/B: Property page 2

Del	otor 1	Case 16-805		Doc 1	Filed 03/09/16 Document	Entered 03/09/16 13:51:48 Page 12 of 55 Case number (if known	
						Cash Location: 5205 N. Lake Street, McHenry IL 60050	\$100.00
[<i>Examp</i> ⊒ No				accounts; certificates counts with the same ins	·	e houses, and other similar
		1	7.1.	Checking 1	Navy Fed	eral Credit Union	\$2,450.12
		1	7.2.	Checking 2	Navy Fed	eral Credit Union	\$29.37
		1	7.3.	Savings	Navy Fed	eral Credit Union	\$8.65
19.	Examp. No Yes Non-pu joint ve	blicly traded stock	estme	nt accounts with accounts with accounts with a country in the coun	th brokerage firms, mor suer name: corporated and unince	ney market accounts orporated businesses, including an intere	est in an LLC, partnership, and
20. I	Govern Negotia Non-ne ■ No	ment and corporat	Name bonude paragraphic street	ne of entity: ds and other ersonal checks hose you cann bout them	negotiable and non-nos, cashiers' checks, pro	% of ownership: egotiable instruments nissory notes, and money orders. by signing or delivering them.	
[<i>Examp</i> ⊒ No –	_ist each account se	counts ERIS parate	A, Keogh, 401	(k), 403(b), thrift saving Institution r	s accounts, or other pension or profit-sharin ame:	g plans
		4	i01(k)	Carlson T	ravel 401(k) Plan	\$5,000.00
_	Your sh		posite	s you have mad	rent, public utilities (elec	tinue service or use from a company ctric, gas, water), telecommunications compa	anies, or others
	☐ Yes				Institution r	ame or individual:	

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No

☐ Yes...... Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

De	ebtor 1	Alisha M Scholz	Document	Page 13 of 55 Case number (if kno	wn)
	=				
	■ No □ Yes	Institution	name and description. Separately file th	ne records of any interests.11 U.S.C. § 52	1(c):
25.	Trusts, ■ No	equitable or future int	erests in property (other than anythin	g listed in line 1), and rights or powers	exercisable for your benefit
	☐ Yes.	Give specific information	n about them		
26.			ks, trade secrets, and other intellectunes, websites, proceeds from royalties a		
	☐ Yes.	Give specific information	n about them		
27.		es, franchises, and oth les: Building permits, ex		n holdings, liquor licenses, professional lic	enses
		Give specific information	n about them		
Me	oney or	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.		unds owed to you			
	■ No □ Yes.	Give specific information	about them, including whether you alre	ady filed the returns and the tax years	
29.	Family Examp ■ No		ım alimony, spousal support, child suppo	ort, maintenance, divorce settlement, prop	erty settlement
	☐ Yes.	Give specific information	I		
30.	Examp			efits, sick pay, vacation pay, workers' con	npensation, Social Security
	■ No □ Yes.	Give specific information	n		
31.	Examp	ts in insurance policies les: Health, disability, or		HSA); credit, homeowner's, or renter's ins	urance
	■ No □ Yes.	Name the insurance con	npany of each policy and list its value.		
			ompany name:	Beneficiary:	Surrender or refund value:
	If you a		s due you from someone who has die ving trust, expect proceeds from a life in	ed surance policy, or are currently entitled to	receive property because
	■ No □ Yes.	Give specific information	n		
33.	_Examp		whether or not you have filed a lawsui nent disputes, insurance claims, or rights		
	■ No □ Yes.	Describe each claim			
34.	Other o	ontingent and unliquid	dated claims of every nature, includin	g counterclaims of the debtor and right	s to set off claims
		Describe each claim			
35.	Any fin ■ No	ancial assets you did r	not already list		
	☐ Yes.	Give specific information			
Off	ıcial Forn	n 106A/B	Schedule A/B: F	roperty	page

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36.	Add the dollar value of all of your entries from Part 4, includi for Part 4. Write that number here		es you have attached	\$7,588.14
	ior rait 4. Write that number here			
Part	Describe Any Business-Related Property You Own or Have an Inte	erest In. List any real esta	ate in Part 1.	
37. D	o you own or have any legal or equitable interest in any business-rela	ited property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part	Describe Any Farm- and Commercial Fishing-Related Property Yo If you own or have an interest in farmland, list it in Part 1.	u Own or Have an Interes	st In.	
16. [o you own or have any legal or equitable interest in any farm	n- or commercial fishir	g-related property?	
	No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Part	Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
•	o you have other property of any kind you did not already lise Examples: Season tickets, country club membership No Yes. Give specific information	t?		
_	res. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write t	hat number here		\$0.00
Part	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$3,032.00		
57.	Part 3: Total personal and household items, line 15	\$0.00		
58.	Part 4: Total financial assets, line 36	\$7,588.14		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+\$0.00		
62.	Total personal property. Add lines 56 through 61	\$10,620.14	Copy personal property total	\$10,620.14
			<u></u>	

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

Debtor 1

\$10,620.14

Fill in this infor	mation to identify your	case:		
Debtor 1	Alisha M Scholz			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption	
2005 Chevrolet Trailblazer 167,000 miles	\$3,032.00	- _	\$2,400.00	735 ILCS 5/12-1001(c)	
Location: 5205 N. Lake Street, McHenry IL 60050 Line from Schedule A/B: 3.1			0% of fair market value, up to y applicable statutory limit		
2005 Chevrolet Trailblazer 167,000 miles	\$3,032.00	.	\$632.00	735 ILCS 5/12-1001(b)	
Location: 5205 N. Lake Street, McHenry IL 60050 Line from <i>Schedule A/B</i> : 3.1			0% of fair market value, up to y applicable statutory limit		
Cash Location: 5205 N. Lake Street,	\$100.00		\$100.00	735 ILCS 5/12-1001(b)	
McHenry IL 60050 Line from Schedule A/B: 16.1			0% of fair market value, up to y applicable statutory limit		
Checking 1: Navy Federal Credit Union	\$2,450.12		\$2,450.12	735 ILCS 5/12-1001(b)	
Line from Schedule A/B: 17.1			0% of fair market value, up to y applicable statutory limit		
Checking 2: Navy Federal Credit Union	\$29.37	•_	\$29.37	735 ILCS 5/12-1001(b)	
Line from Schedule A/B: 17.2			0% of fair market value, up to y applicable statutory limit		

Filed 03/09/16 Entered 03/09/16 13:51:48 Document Page 16 of 55 Debtor 1 Alisha M Scholz Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Savings: Navy Federal Credit Union 735 ILCS 5/12-1001(b) \$8.65 \$8.65 Line from Schedule A/B: 17.3 100% of fair market value, up to any applicable statutory limit 401(k): Carlson Travel 401(k) Plan 735 ILCS 5/12-1006 \$5,000.00 \$5,000.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.)

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Case 16-80564

No

Yes

Doc 1

Desc Main

Fill in this infor				
Debtor 1	Alisha M Scholz			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				heck if this is mended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

		Document	Page 1	8 of 55	-	
Fill in this	s information to identify your	case:				
Debtor 1	Alisha M Scholz					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, fil	ling) First Name	Middle Name	Last Name			
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS			
Case num (if known)	nber				_	heck if this is an mended filing
Sched		/ho Have Unsecured				12/15
any execute Schedule G Schedule D left. Attach	ory contracts or unexpired leases Executory Contracts and Unexp Creditors Who Have Claims Sec the Continuation Page to this pag case number (if known).	ee Part 1 for creditors with PRIORIT that could result in a claim. Also lired Leases (Official Form 106G). I ured by Property. If more space is ge. If you have no information to re	list executory of Do not include needed, copy	contracts on Schedule A/B: any creditors with partially the Part you need, fill it out,	Property (Official secured claims number the ent	al Form 106A/B) and on that are listed in ries in the boxes on the
Part 1:	List All of Your PRIORITY Un					
	y creditors have priority unsecure	d claims against you?				
_	. Go to Part 2.					
☐ Yes	i	TV Hanna arma d Claima				
	List All of Your NONPRIORIT					
	y creditors have nonpriority unsec					
		art. Submit this form to the court with	your other sche	edules.		
Yes	S.					
unsecu	ured claim, list the creditor separately ne creditor holds a particular claim, I	aims in the alphabetical order of the y for each claim. For each claim lister is the other creditors in Part 3.If you	d, identify what t	type of claim it is. Do not list c	laims already incl	luded in Part 1. If more
						Total claim
	/ R Concepts	Last 4 digits of acc	count number	5680		\$287.00
	onpriority Creditor's Name 8-3 E Dundee Road	When was the deb	t incurred?			
=	arrington, IL 60010	Which was the deb	t incurred :			
	umber Street City State Zlp Code	As of the date you	file, the claim	is: Check all that apply		
_	/ho incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and and		RITY unsecure	d claim:		
	Check if this claim is for a com					
	ebt the claim subject to offset?	☐ Obligations arisi report as priority cla		ration agreement or divorce t	hat you did not	
_	No	<u>-</u> ' ' '		g plans, and other similar deb	ots	
] Yes	•	•	George L Stankevych		
_	- 100	Other. Specify			5 . 0	

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Debtor 1 Alisha M Scholz Case number (if know) 4.2 \$152.00 **AFNI** Last 4 digits of account number 8353 Nonpriority Creditor's Name 1310 Martin Luther King Drive When was the debt incurred? Opened 9/01/13 Bloomington, IL 61701 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney - AT&T ☐ Yes 4.3 Americollect Inc Last 4 digits of account number 3235 \$88.00 Nonpriority Creditor's Name PO Box 1566 When was the debt incurred? Opened 5/01/14 Manitowoc, WI 54221 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Attorney - MHS Physician ☐ Yes Other. Specify Services 13.0 4.4 Americollect Inc Last 4 digits of account number 3645 \$87.00 Nonpriority Creditor's Name PO Box 1566 When was the debt incurred? Opened 5/01/14 Manitowoc, WI 54221 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Attorney - MHS Physician ☐ Yes Other. Specify Services 13.0

Document Page 20 of 55 Debtor 1 Alisha M Scholz Case number (if know) 4.5 \$87.00 Americollect Inc Last 4 digits of account number 0285 Nonpriority Creditor's Name PO Box 1566 When was the debt incurred? Opened 5/01/14 Manitowoc, WI 54221 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Collection Attorney - MHS Physician ■ Other. Specify Services 13.0 ☐ Yes 4.6 Americollect Inc Last 4 digits of account number 2615 \$87.00 Nonpriority Creditor's Name PO Box 1566 When was the debt incurred? Opened 5/01/14 Manitowoc, WI 54221 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney - MHS Physician ☐ Yes Other. Specify Services 13.0 4.7 Americollect Inc Last 4 digits of account number 3655 \$68.00 Nonpriority Creditor's Name PO Box 1566 When was the debt incurred? Opened 5/01/14 Manitowoc, WI 54221 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

Other. Specify Services 13.0

lacksquare Debts to pension or profit-sharing plans, and other similar debts

Collection Attorney - MHS Physician

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Debtor 1 Alisha M Scholz Case number (if know) 4.8 \$68.00 Americollect Inc Last 4 digits of account number 0275 Nonpriority Creditor's Name PO Box 1566 When was the debt incurred? Opened 5/01/14 Manitowoc, WI 54221 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Collection Attorney - MHS Physician ■ Other. Specify Services 13.0 ☐ Yes 4.9 Americollect Inc Last 4 digits of account number 2625 \$68.00 Nonpriority Creditor's Name PO Box 1566 When was the debt incurred? Opened 5/01/14 Manitowoc, WI 54221 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney - MHS Physician ☐ Yes Other. Specify Services 13.0 4.1 Americollect Inc 7595 \$21.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 1566 When was the debt incurred? Opened 11/01/13 Manitowoc, WI 54221 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Collection Attorney - MHS Physician Other. Specify Services 13.0 ☐ Yes

Page 22 of 55 Case number (if know) Document Debtor 1 Alisha M Scholz 4.1 Americollect Inc 4125 \$20.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 1566 When was the debt incurred? Opened 6/01/13 Manitowoc, WI 54221 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Collection Attorney - MHS Physician ☐ Yes Other. Specify Services 11.0 4.1 Americollect Inc \$17.00 3635 Last 4 digits of account number Nonpriority Creditor's Name PO Box 1566 When was the debt incurred? Opened 5/01/14 Manitowoc, WI 54221 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No \square Debts to pension or profit-sharing plans, and other similar debts Collection Attorney - MHS Physician ☐ Yes Other. Specify Services 13.0 4.1 Americollect Inc 0265 \$17.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 1566 When was the debt incurred? Opened 5/01/14 Manitowoc, WI 54221 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

Official Form 106 E/F

debt

■ No

☐ Yes

Other. Specify Services 13.0

report as priority claims

☐ Obligations arising out of a separation agreement or divorce that you did not

Collection Attorney - MHS Physician

☐ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Alisna W Scholz		Case number (if know)	
Americollect Inc	Last 4 digits of account number	2605	\$17.00
Nonpriority Creditor's Name PO Box 1566	When was the debt incurred?	Opened 5/01/14	
Manitowoc, WI 54221 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Collection Services 13	Attorney - MHS Physician 3.0	
Americollect Inc	Last 4 digits of account number	8485	\$13.00
Nonpriority Creditor's Name PO Box 1566 Manitowoc, WI 54221	When was the debt incurred?	Opened 11/01/13	
Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No □ Yes	□ Debts to pension or profit-sharin Collection Services 13	Attornev - MHS Physician	
ComEd	Last 4 digits of account number	0079	\$4,000.00
Nonpriority Creditor's Name PO Box 6111 Carol Stream, IL 60197-6111	When was the debt incurred?		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	Other. Specify Utilities		

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Page 24 of 55 Case number (if know) Document Debtor 1 Alisha M Scholz

4.1	Consumers Coop Credit Union	Last 4 digits of account number	6737	\$1,604.00		
	Nonpriority Creditor's Name	_	Opened 2/01/07 Last Active			
	PO Box 9119 Waukegan, IL 60079	When was the debt incurred?	7/09/15			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify Credit Card	I - Visa Platinum			
4.1	Consumers Credit Union	Last 4 digits of account number	5801	\$1,268.66		
	Nonpriority Creditor's Name 1210 S. Lake Street Mundelein, IL 60060-0503	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured				
	\square Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify Visa Plating				
4.1	Convergent Outsourcing, Inc.	Last 4 digits of account number	0518	\$267.00		
	Nonpriority Creditor's Name PO Box 9004 Renton, WA 98057	When was the debt incurred?	Opened 9/01/15			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims				
	■ No	Debts to pension or profit-sharin				
	☐ Yes	■ Other. Specify Collection	Collection Attorney - Comcast			

Document Page 25 of 55 Debtor 1 Alisha M Scholz Case number (if know) 4.2 H & R Accounts Inc. 0131 \$2,772.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Attention: Bankruptcy When was the debt incurred? Opened 7/01/12 PO Box 672 **Moline, IL 61265** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Collection Attorney - Centegra Hospital-Other. Specify ☐ Yes Woodstock 4.2 H & R Accounts Inc. \$1,803.00 2506 Last 4 digits of account number Nonpriority Creditor's Name **Attention: Bankruptcy** When was the debt incurred? Opened 11/01/15 PO Box 672 Moline, IL 61265 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney - Centegra Hospital-Other. Specify ☐ Yes McHenry 4.2 5706 \$887.00 H & R Accounts Inc. Last 4 digits of account number Nonpriority Creditor's Name Attention: Bankruptcy When was the debt incurred? Opened 10/01/15 PO Box 672 Moline, IL 61265 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not

Official Form 106 E/F

■ No

☐ Yes

■ Other. Specify McHenry

Debts to pension or profit-sharing plans, and other similar debts

Collection Attorney - Centegra Hospital-

report as priority claims

Is the claim subject to offset?

Case 16-80564 Doc 1 Filed 03/09/16 Entered 03/09/16 13:51:48 Desc Main Document Page 26 of 55 Debtor 1 Alisha M Scholz Case number (if know) 4.2 H & R Accounts Inc. 6393 \$239.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Attention: Bankruptcy When was the debt incurred? Opened 6/01/13 PO Box 672 **Moline, IL 61265** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Collection Attorney - Centegra Hospital-Other. Specify ☐ Yes **McHenry** 4.2 H & R Accounts Inc. \$110.00 6239 Last 4 digits of account number Nonpriority Creditor's Name **Attention: Bankruptcy** When was the debt incurred? Opened 10/01/12 PO Box 672 Moline, IL 61265 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney - Centegra Hospital-Other. Specify ☐ Yes McHenry 4.2 H & R Accounts Inc. 2345 \$96.00 Last 4 digits of account number 5 Nonpriority Creditor's Name Attention: Bankruptcy When was the debt incurred? Opened 4/01/12 PO Box 672 Moline, IL 61265 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent

Who incurred the debt? Check one.

□ Debtor 1 only □ Contingent
□ Debtor 2 only □ Unliquidated
□ Debtor 1 and Debtor 2 only □ Disputed
□ Debtor 1 and Debtor 2 only □ Disputed
□ Debtor 1 and Debtor 2 only □ Disputed

☐ At least one of the debtors and another☐ Check if this claim is for a community

☐ Check if this claim is for a community debt

Is the claim subject to offset?

■ No

☐ Yes

Type of NONPRIORITY unsecured claim:

☐ Student loans

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

□ Debts to pension or profit-sharing plans, and other similar debts
□ Collection Attorney - Centegra Hospital-

Other. Specify McHenry

Page 27 of 55 Case number (if know) Document Debtor 1 Alisha M Scholz 4.2 IC Systems, Inc. 3001 \$152.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 444 Highway 96 East Opened 2/01/13 When was the debt incurred? PO Box 64378 St Paul, MN 55164 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Collection Attorney - AT&T 4.2 **Illinois Collection Service** 8310 \$379.00 Last 4 digits of account number Nonpriority Creditor's Name 8231 185th Street Opened 3/01/14 When was the debt incurred? Suite 100 Tinley Park, IL 60487 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney - Illinois Dermatology ☐ Yes Other. Specify Institute 4.2 **Illinois Collection Service** 8311 \$161.00 Last 4 digits of account number Nonpriority Creditor's Name 8231 185th Street When was the debt incurred? Opened 3/01/14 Suite 100 Tinley Park, IL 60487 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

Other. Specify

lacksquare Debts to pension or profit-sharing plans, and other similar debts

Institute

Collection Attorney - Illinois Dermatology

Document Page 28 of 55 Case number (if know) Debtor 1 Alisha M Scholz 4.2 Johnsburg School District # 12 \$1,533.75 Last 4 digits of account number 9 Nonpriority Creditor's Name 2222 W. Church Street When was the debt incurred? Johnsburg, IL 60051 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts SCHOLCAS000, SCHOLSAM000., & SCHOLWES001 ☐ Yes Other. Specify **Courses and Fees** 4.3 \$2,006.00 **Keynote Consulting** 3494 Last 4 digits of account number Nonpriority Creditor's Name 220 West Campus Drive When was the debt incurred? Opened 7/01/15 Suite 102 Arlington Heights, IL 60004 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney - Consumers** ■ Other Specify Cooperative Credit Union ☐ Yes 4.3 **Lakemoor Dental PC** 3079 \$1,037.00 Last 4 digits of account number Nonpriority Creditor's Name Dr. Sima Patel When was the debt incurred? 28956 W. Route 120 Lakemoor, IL 60051-2215 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not

■ No
□ Yes

Debts to pension or profit-sharing plans, and other similar debts

report as priority claims

Other. Specify

Is the claim subject to offset?

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4.3 2	Northwest	Collectors	Last 4 digits of account number	8441			\$88.00
3		editor's Name nquin Road	When was the debt incurred?	Ope	ned 8/01	/14	-
		eadows, IL 60008					
		t City State ZIp Code	As of the date you file, the claim	is: Chec	k all that app	bly	
_	_	d the debt? Check one.	<u>_</u>				
	Debtor 1 o	,	Contingent				
	Debtor 2 o	nly	☐ Unliquidated				
	Debtor 1 a	nd Debtor 2 only	☐ Disputed				
	At least on	e of the debtors and another	Type of NONPRIORITY unsecure	ed claim:			
		his claim is for a community	☐ Student loans				
	lebt s the claim s	subject to offset?	☐ Obligations arising out of a sep report as priority claims	aration a	greement or	divorce that you did not	
	No		Debts to pension or profit-shari	ng plans,	and other si	milar debts	
[Yes		■ Other. Specify Collection	Attorn	ey - Jack	son Eye S.C.	-
Part 3:	List Othe	rs to Be Notified About a D	ebt That You Already Listed				
is trying have me	to collect fi ore than one	rom you for a debt you owe to s	about your bankruptcy, for a debt that someone else, list the original creditor i nat you listed in Parts 1 or 2, list the add or submit this page.	n Parts 1	or 2, then I	ist the collection agenc	y here. Similarly, if you
Name and			On which entry in Part 1 or Part 2 did yo Line 4.16 of (Check one):		•	tor? th Priority Unsecured Cla	ima
	ment Cen	nter				th Nonpriority Unsecured	
Chicago	o, IL 6066	8-0001		– Fait 2.	Creditors wi	in Nonphonity Onsecured	Ciairis
			Last 4 digits of account number				
Name and			On which entry in Part 1 or Part 2 did yo Line 4.16 of (Check one):		•		·
PO Box				_		th Priority Unsecured Cla	
Chicago	o, IL 6068	0	Last 4 digits of account number	■ Part 2:	Creditors wi	th Nonpriority Unsecured	Claims
Port 4:	Add the	Amounts for Each Type of I	Inconurad Claim				
Part 4:		Amounts for Each Type of I					
	e amounts o unsecured c		aims. This information is for statistical	reporting	g purposes	only. 28 U.S.C. §159. Ad	d the amounts for each
						Total Claim	
	6a	. Domestic support obligatio	ns	6a.	\$	0.00	
	tal				· —		_
claiı from Par		. Taxes and certain other del	ots you owe the government	6b.	\$	0.00	
	6c		al injury while you were intoxicated	6c.	\$	0.00	_
	6d	•	nsecured claims. Write that amount here.	6d.	\$	0.00	_
							_
	6e	. Total Priority. Add lines 6a th	nrough 6d.	6e.	\$	0.00	_
	6f.	Student loans		6f.	¢	Total Claim	
To	tal	Caucia ioaila		OI.	\$	0.00	_
claii	ms	-					
from Par	t 2 6g	 Obligations arising out of a you did not report as priorit 	separation agreement or divorce that	6g.	\$	0.00	
	Ch.	Debte to manaism or modit	basis a stance and athen similar delete	C.L		0.00	_

6h.

6j.

Debts to pension or profit-sharing plans, and other similar debts

Other. Add all other nonpriority unsecured claims. Write that amount

Total Nonpriority. Add lines 6f through 6i.

0.00

19,500.41

19,500.41

		DOCUME	ni Paue 30 01 55	
Fill in this infor	mation to identify your	case:		
Debtor 1	Alisha M Scholz			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	-

		Docume	ent Page 31 d	ot 55	
Fill in this	information to identify your	case:			
Debtor 1	Aliaha M Cahale				
Debioi i	Alisha M Scholz First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing	ng) First Name	Middle Name	Last Name		
United Sta	ites Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Ormod Old	noo Barini apioy Gourt for the.				
Case num	ber				
(if known)					☐ Check if this is an
					amended filing
Officia	l Form 106H				
Sched	lule H: Your Cod	ebtors			12/15
					ate as possible. If two married
					needed, copy the Additional Page, p of any Additional Pages, write
	and case number (if known				, ,
4.5-			1 2 2 4 24	1.14	
1. DO	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No					
□ Yes	2				
	,				
	hin the last 8 years, have you				
Arizon	na, California, Idaho, Louisiana	, Nevada, New Mexico, Pu	erto Rico, Texas, Wash	ington, and Wisconsin.)	
No	Go to line 3.				
	s. Did your spouse, former spo	use or legal equivalent live	with you at the time?		
— 103	s. Dia your spouse, former spo	use, or legal equivalent live	with you at the time:		
					g with you. List the person shown
					he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	olumn 2.		u.o o (oo.a. : o : .	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	Outure 4 Varia and bear			Orlean O The en	aditanta subana sasa assa tha dabt
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Check all schedule	editor to whom you owe the debt
				Oncor an concaur	oo mat appiy.
3.1				☐ Schedule D, lin	e
	Name			□ Schedule E/F, I	line
				☐ Schedule G, lin	ne
-	Number Street			_	
	City	State	ZIP Code		
3.2	Name			Schedule D, lin	
	Name			☐ Schedule E/F, I	
				☐ Schedule G, lin	ne
-	Number Street			_	
	City	State	ZIP Code		

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Fill	in this information to	identify your ca	950·				1				
	btor 1	Alisha M Sc									
	btor 2 buse, if filing)										
Uni	ited States Bankrupt	cy Court for the	NORTHERN DISTRIC	CT OF ILLINOIS							
(If ki	se number								ed filing ent showing	g postpetition ollowing date:	
	fficial Form						N	1M / DD/ \	YYYY		
Веа		curate as poss	DMC sible. If two married peo are married and not fili								
spo atta	ouse. If you are sepa ch a separate shee	arated and you	r spouse is not filing w On the top of any additi	th you, do not inclu	de infor	mati	on abou	t your sp	ouse. If mo	ore space is	needed,
1.	Fill in your emplo	yment		Debtor 1				Debtor 2	2 or non-fi	ling spouse	
	If you have more t	page with	Employment status	■ Employed□ Not employed				☐ Employed ☐ Not employed			
	information about employers.	out additional	Occupation	Clerk					. ,		
	Include part-time, self-employed wor		Employer's name	Carlson Waggo	nlet Tra	ivel					
	Occupation may ir or homemaker, if it		Employer's address								
			How long employed t	here? 5 years	i			_			
Pa	rt 2: Give Det	ails About Mor	thly Income								
	imate monthly inco use unless you are s		ate you file this form. If	you have nothing to r	eport for	any	line, write	e \$0 in the	space. Inc	clude your no	n-filing
	ou or your non-filing s e space, attach a se		ore than one employer, co	ombine the informatio	n for all e	empl	oyers for	that perso	on on the li	nes below. If	you need
							For Del	otor 1		otor 2 or ng spouse	
2.			ry, and commissions (b calculate what the monthl		2.	\$	3	,679.91	\$	N/A	-
3.	Estimate and list	monthly overt	me pay.		3.	+\$		0.00	+\$	N/A	-
4.	Calculate gross I	ncome. Add lir	e 2 + line 3.		4.	\$	3,6	79.91	\$	N/A	

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Debt	tor 1	Alisha M Schol	z		(Case nur	mber (if kno	own)			
	Сор	y line 4 here		4.		For De	ebtor 1 3,679	.91		Debtor 2 or filing spouse N/	
5	Lict	all payroll doduct				_	•				
5.	5a.		and Social Security deductions	5a		\$	865		\$	N/	
	5b. 5c.	-	ributions for retirement plans ibutions for retirement plans	5b 5c		\$.00	\$	N/	
	5d.	-	ments of retirement fund loans	5d		\$.00	\$—	N/	
	5e.	Insurance	ments of retirement fund louns	5e		\$	500		\$	N/	
	5f.	Domestic suppo	ort obligations	5f.		\$.00	\$	N/	
	5g.	Union dues		5g		\$.00	\$	N/	
	5h.	Other deduction	ns. Specify:	5h		\$.00	+ \$	N/	
6.	Add	the payroll deduc	ctions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,365	.42	\$	N/	A
7.	Cald	culate total month	ly take-home pay. Subtract line 6 from line 4.	7.		\$	2,314	49	\$	N/	Α
8.	List 8a.	Net income from profession, or fa Attach a stateme	regularly received: n rental property and from operating a business, arm ent for each property and business showing gross y and necessary business expenses, and the total								
		monthly net inco		8a		\$.00	\$	N/	
	8b.	Interest and div		8b).	\$	0	.00	\$	N/	<u>A</u>
	8c. 8d.	regularly receive Include alimony,	spousal support, child support, maintenance, divorce property settlement.	nt 8c 8d		\$	1,071 0	.00	\$	N/ N/	
	8e.	Social Security	oompondation	8e		\$.00	\$	N/	
	8f.	Include cash ass that you receive, Nutrition Assistan Specify:	ent assistance that you regularly receive istance and the value (if known) of any non-cash assistand such as food stamps (benefits under the Supplemental nce Program) or housing subsidies.	8f.		\$.00	\$	N/	
	8g.	Pension or retir		8g		\$.00	\$	N/	
	8h.	Other monthly i	ncome. Specify:	8n	1.+	\$	0	.00	+ \$	N/	<u>A</u>
9.	Add	all other income.	Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$.	1,071	.00	\$	N	I/A
10.		-	come. Add line 7 + line 9. 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	3,3	885.49	+ \$_		N/A = \$	3,385.49
11.	Inclu othe	ude contributions from triends or relative not include any amo	contributions to the expenses that you list in <i>Schedu</i> om an unmarried partner, members of your household, you is. bunts already included in lines 2-10 or amounts that are no	ur depe					-	chedule J. 11. +\$ _	0.00
12.		e that amount on th	e last column of line 10 to the amount in line 11. The rene Summary of Schedules and Statistical Summary of Cert							12. \$	3,385.49
13.	Do y	you expect an inci No.	rease or decrease within the year after you file this for	m?						Comi	bined hly income
		Yes. Explain:	Child support will decrease by \$100.00 per mor an arrearage as of that date.	nth in	Au	gust,	2016 be	caus	e of t	he payment	t in full of

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Fill	in this informa	tion to identify yo	our case:			1				
	tor 1	Alisha M Scl				Che	eck if this is:			
		711101101111111111111111111111111111111					An amended filing			
	tor 2 ouse, if filing)						A supplement show 13 expenses as of	ving postpetition chapter the following date:		
Linit	ed States Bankr	ruptcy Court for the	· NORTH	IERN DISTRICT OF ILLIN	OIS	MM / DD / YYYY				
Onit	eu States Bariki	upicy Court for the	. NORTI	ILKN DISTRICT OF ILLIN	013		WIWI / DD / TTTT			
1	e number nown)									
Of	fficial Fo	rm 106J								
S	chedule	J: Your	Exper	ises				12/1		
info	ormation. If m		eded, atta	If two married people and the chance of the						
Par		ibe Your House	ehold							
1.	Is this a joir									
	■ No. Go to		in a senar	ate household?						
	□ N		a copa.							
			st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Del	btor 2.			
2.	Do you have	e dependents?	□ No							
	Do not list Do Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?		
	Do not state	the						□ No		
	dependents	names.			Daughter		12	Yes		
					Son		16	□ No ■ Yes		
								□ No		
					Daughter		17	Yes		
								□ No		
3.	Do your exp	enses include		No				☐ Yes		
		f people other t d your depende	han $_{f \Box}$	Yes						
exp	imate your ex enses as of a		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp						
app	licable date.									
the		n assistance an		government assistance i luded it on <i>Schedule I:</i> Y			Your exp	enses		
		_								
4.		or home owners and any rent for the		ses for your residence. I r lot.	nclude first mortgag	e 4.	\$	1,000.00		
	If not includ	led in line 4:								
	4a. Real e	estate taxes				4a.	\$	0.00		
	•	rty, homeowner's				4b.	·	0.00		
		maıntenance, re owner's associat		ıpkeep expenses dominium dues		4c. 4d.	·	0.00		
5.				our residence, such as ho	me equity loans	5.		0.00		

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Debtor	r 1 Alisha N	// Scholz	Case num	ber (if known)	
6. U	Itilities:				
-		, heat, natural gas	6a.	\$	225.00
		ewer, garbage collection	6b.	· ·	30.00
_		e, cell phone, Internet, satellite, and cable services	6c.	·	258.00
	d. Other. Sp		6d.	·	0.00
-		sekeeping supplies	7.	*	950.00
		children's education costs	8.	·	
_		dry, and dry cleaning	9.	·	90.00
	_	products and services	10.	·	
				· -	80.00
		ental expenses	11.	Φ	200.00
	ransportation to not include o	I. Include gas, maintenance, bus or train fare.	12.	\$	650.00
		clubs, recreation, newspapers, magazines, and books	13.	·	75.00
		tributions and religious donations	14.	·	0.00
	nsurance.	unbutions and religious domations	14.	Ψ	0.00
-		nsurance deducted from your pay or included in lines 4 or 20.			
	5a. Life insur		15a.	\$	0.00
	5b. Health ins		15b.	·	0.00
	5c. Vehicle ir		15c.	·	60.00
		urance. Specify:	15d.	·	0.00
		nclude taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
_	specify:	nclude taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
		lease payments:		·	0.00
		nents for Vehicle 1	17a.	\$	0.00
1	7b. Car paym	nents for Vehicle 2	17b.	\$	0.00
	7c. Other. Sp		17c.	\$	0.00
	7d. Other. Sp		17d.	\$	0.00
		s of alimony, maintenance, and support that you did not report as		· -	
		your pay on line 5, Schedule I, Your Income (Official Form 106l).		\$	0.00
9. O	ther payment	s you make to support others who do not live with you.		\$	0.00
S	pecify:		19.		
		perty expenses not included in lines 4 or 5 of this form or on Scho			
2	0a. Mortgage	s on other property	20a.	\$	0.00
2	Real esta	te taxes	20b.	\$	0.00
2	0c. Property,	homeowner's, or renter's insurance	20c.	\$	0.00
2	0d. Maintena	nce, repair, and upkeep expenses	20d.	\$	0.00
2	0e. Homeowi	ner's association or condominium dues	20e.	\$	0.00
i. o	Other: Specify:		21.	+\$	0.00
	-	monthly expenses			
	2a. Add lines 4	<u> </u>		\$	3,618.00
2	2b. Copy line 2	22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
2	2c. Add line 22	2a and 22b. The result is your monthly expenses.		\$	3,618.00
3 ~	alculato vous	monthly net income			
	-	monthly net income.	23a.	¢	2 205 40
		12 (your combined monthly income) from Schedule I.		·	3,385.49
2	sp. Copy you	r monthly expenses from line 22c above.	23b.	-ф	3,618.00
2	3c Subtract	your monthly expenses from your monthly income.			
2		t is your <i>monthly net income</i> .	23c.	\$	-232.51
		•			
		an increase or decrease in your expenses within the year after yo			
		ou expect to finish paying for your car loan within the year or do you expect you	ır mortgage ı	payment to increas	se or decrease because o
		terms of your mortgage?			
	No.				
	☐ Yes.	Explain here:			

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Fill in this infor	mation to identify your	case:			
Debtor 1	Alisha M Scholz	Middle Mann	Land Name		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					Check if this is an amended filing
					amended ming
Official For	m 106Dec				
		اميناه انتخاصا	Dabtarla Ca	la a duula a	
Declara	tion About a	ın Individual	Deptor's Sc	neaules	12/15
If two married p	eople are filing together	, both are equally respor	nsible for supplying cor	rect information.	
You must file th	is form whenever you fi	le bankruptcy schedules	or amended schedules.	. Making a false staten	nent, concealing property, or
			ruptcy case can result i	n fines up to \$250,000	, or imprisonment for up to 20
years, or both. 1	18 U.S.C. §§ 152, 1341, 1	519, and 3571.			
Sig	ın Below				
0.5	J.: = 4.4				
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out b	ankruptcy forms?	
■ No					
☐ Yes.	Name of person			Attach Bankr	ruptcy Petition Preparer's Notice,
_	·			Declaration, a	and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sumi	mary and schedules file	d with this declaration	n and
•	sha M Scholz		X		
	sna w Scholz a M Scholz		Signature of	Debtor 2	
	ure of Debtor 1		Signatule of	D00(0) 2	

Date _____

Date March 9, 2016

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Fill ir	n this inform	nation to identify you	r case:			
Debto	or 1	Alisha M Scholz First Name	Middle Name	Last Name		
Debto						
	se if, filing)	First Name	Middle Name	Last Name		
Unite	d States Bar	hkruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
Case (if know	number					Check if this is an mended filing
Sta Be as inform	complete a	of Financial and accurate as possiore space is needed,	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup y additional pages, write you	
numb		i). Answer every ques etails About Your Ma	stion. arital Status and Where You	Lived Before		
1. V	Vhat is your	current marital statu	ıs?			
	■ Married □ Not mar	ried				
2. [During the la	ıst 3 years, have you	lived anywhere other than	where you live now?		
•	■ No □ Yes. List	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>'</i> .	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
[■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	hedule H: Your Codebtors (O	fficial Form 106H).		
Part :	2 Explain	n the Sources of You	r Income			
F	ill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
[☐ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$8,845.23	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Case number (if known) Document Debtor 1 Alisha M Scholz

				Debtor 1			Debtor 2		
				Sources of income Check all that apply.	(befo	re deductions and sions)	Sources of ince Check all that a		Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2015)		■ Wages, commissions, bonuses, tips		\$45,853.21	☐ Wages, combonuses, tips	missions,			
				☐ Operating a business			☐ Operating a l	ousiness	
	r the calend nuary 1 to		efore that: r 31, 2014)	■ Wages, commissions, bonuses, tips		\$38,773.39	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business			Operating a	ousiness	
5.	Include include and other winnings. I	come rega public ben If you are	rdless of wheth efit payments; filing a joint cas	e during this year or the two er that income is taxable. Ex- pensions; rental income; inte- ee and you have income that your ome from each source separa	amples o rest; divi	of other income are a dends; money collec- ived together, list it o	alimony; child supported from lawsuits; only once under De	royalties; an ebtor 1.	
				Debtor 1 Sources of income Describe below	(befo	re deductions and isions)	Debtor 2 Sources of inco Describe below.		Gross income (before deductions and exclusions)
	om January date you f		ent year until ankruptcy:	Child Support		\$1,723.08			,
	r last calen nuary 1 to		r 31, 2015)	Child Support		\$9,019.08			
	r the calend inuary 1 to		efore that: r 31, 2014)	Child Support		\$7,904.00			
Pa	rt 3: List	Certain F	Payments You	Made Before You Filed for	Rankrııı	ntcv			
		- Contain i	aymomo rou	made Belefe Fed Filed for	Dama a				
6.	_	Neither I	Debtor 1 nor D	's debts primarily consume Pebtor 2 has primarily const personal, family, or househo	umer de	bts. Consumer debt	s are defined in 11	U.S.C. § 10	1(8) as "incurred by an
		During th	e 90 days befo	re you filed for bankruptcy, d	id you pa	ay any creditor a tota	l of \$6,225* or mor	e?	
		□ No.	Go to line 7						
		☐ Yes	paid that cr not include	each creditor to whom you pa editor. Do not include paymer payments to an attorney for t t on 4/01/16 and every 3 year	nts for do his bank	omestic support oblig ruptcy case.	gations, such as ch	ild support a	and alimony. Also, do
	Yes.			r both have primarily consure you filed for bankruptcy, d			l of \$600 or more?		
		■ No.	Go to line 7						
		□ Yes	include pay	each creditor to whom you pa ments for domestic support o this bankruptcy case.					
	Creditor's	s Name a	nd Address	Dates of payme	ent	Total amount paid	Amount you still owe	Was this	payment for

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Case number (if known) Document Debtor 1 Alisha M Scholz

7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. No	rtners; relatives of any gene control, or owner of 20% or	eral partners; partne r more of their voting	rships of whic securities; ar	h you are a gener nd any managing a	al partner; corporations agent, including one for
	Yes. List all payments to an insider	Dates of management	Total amount	A	Dansan fan	
	Insider's Name and Address	Dates of payment	Total amount paid	Amount yo still ow		this payment
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos		ments or transfer a	ny property o	on account of a d	ebt that benefited an
	No					
	Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount yo still ow		this payment ditor's name
Par	t 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.					
	Case title	Nature of the case	Court or agency		Status of the	ne case
	Case number Wesley Scholz, II, Plaintiff, v. Alisha Scholz, Defendant. 13 DV 766	Dissolution of Marriage	Circuit Court of Judicial Cir. 2200 N. Semina Woodstock, IL	ary Avenue	■ Pending □ On appe	eal
	H & R Accounts, Inc., Plaintiff, v.	Collection	Circuit Court of the 22nd Judicial Cir.		■ Pending	
	Wesley Scholz and Alisha Scholz,					☐ On appeal
	Defendants. 15 SC 739	2200 N. Seminary Street Woodstock, IL 60098			☐ Concluded	
					Garnishm 10/30/201	ent Order entered 5
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below		rty repossessed, fo	oreclosed, ga	rnished, attache	d, seized, or levied?
	■ No □ Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		D	ate	Value of the
		Explain what happened				property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment becall No Yes. Fill in the details.		uding a bank or fin	ancial institu	tion, set off any	amounts from your
	Creditor Name and Address	Describe the action the	creditor took	D	ate action was	Amount
				ta	iken	

Case 16-80564 Doc 1 Filed 03/09/16 Entered 03/09/16 13:51:48 Desc Main Page 40 of 55 Case number (if known) Document Debtor 1 Alisha M Scholz 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

Attorney Fees

Yes. Fill in the details. Person Who Was Paid

Address Email or website address Person Who Made the Payment, if Not You The Law Office of David L. Stretch 5447 W. Bull Valley Road McHenry, IL 60050-7410 stretchlaw@gmail.com

Description and value of any property transferred

Date payment or transfer was made

Amount of payment

1/5/2016

\$1,500.00

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Debtor 1 Alisha M Scholz

17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you No Yes. Fill in the details.	s or to make payments			or transfer any prope	rty to anyone who
	Person Who Was Paid Address	Description and v transferred	alue of any prop	perty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrupto transferred in the ordinary course of your bu Include both outright transfers and transfers may include gifts and transfers that you have already No Yes. Fill in the details.	siness or financial affa de as security (such as t	nirs? he granting of a s			
	Person Who Received Transfer Address	Description and v			any property or received or debts change	Date transfer was made
19.	Person's relationship to you Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prot ■ No □ Yes. Fill in the details.		y property to a s	self-settled tru	ust or similar device	of which you are a
	Name of trust	Description and v	alue of the prop	erty transferr	ed	Date Transfer was made
	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ No Yes. Fill in the details.	, were any financial ac	counts or instru	iments held in		, ,
		Last 4 digits of account number	Type of accou instrument	clo mo	te account was osed, sold, oved, or nsferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S	ess to it?	y safe deposi		Do you still have it?
22.	Have you stored property in a storage unit or ■ No □ Yes. Fill in the details.	State and ZIP Code) r place other than your	home within 1 y	year before yo	ou filed for bankrupto	су
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe the	contents	Do you still have it?

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Debtor 1 Alisha M Scholz

Pai	t 9: Identify Property You Hold or Control for	Someone Else			
23.	Do you hold or control any property that someofor someone.	one else owns? Include any proper	rty you borrowed from, are storing fo	r, or hold in trust	
	No				
	Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value	
Pa	t 10: Give Details About Environmental Informa	ation			
For	the purpose of Part 10, the following definitions	apply:			
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these substances.	ir, land, soil, surface water, ground			
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	_	law, whether you now own, operate,	or utilize it or used	
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of wher	n they occurred.		
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environm	ental law?	
■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice	
25.	Have you notified any governmental unit of any	release of hazardous material?			
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice	
26.	Have you been a party in any judicial or adminis	strative proceeding under any envi	ironmental law? Include settlements	and orders.	
	■ No				
	Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case	
Pai	t 11: Give Details About Your Business or Con	nections to Any Business			
27.	Within 4 years before you filed for bankruptcy, o	did you own a business or have ar	ny of the following connections to any	y business?	
	☐ A sole proprietor or self-employed in a t	rade, profession, or other activity,	either full-time or part-time		
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	iip (LLP)		
	☐ A partner in a partnership				
	☐ An officer, director, or managing execut	tive of a corporation			
	☐ An owner of at least 5% of the voting or equity securities of a corporation				

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□ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Address No □ Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) Date Issued Employer Identification number Do not include Social Security number or ITIN. Dates business existed Dates business? Include all financial institutions, creditors, or other parties. Date Issued Part 12: Sign Below
Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) Date Issued
institutions, creditors, or other parties. ■ No □ Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code)
Name Address (Number, Street, City, State and ZIP Code)
Address (Number, Street, City, State and ZIP Code)
Port 49. Sign Polow
I have read the answers on this <i>Statement of Financial Affairs</i> and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Alisha M Scholz
Alisha M Scholz Signature of Debtor 2
Date March 9, 2016 Date
Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No □ Yes
Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ■ No
■ No Yes. Name of Person Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor 1	Alisha M Scholz			
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				Check if this is ar amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	_
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1	Alisha M Scholz	Case number (if known)	
name: Descrip property securing	y	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	□ Yes
For any ur in the info	rmation below. Do not list real estate	rty Leases t you listed in Schedule G: Executory Contracts and Unexpire e leases. Unexpired leases are leases that are still in effect; the erty lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2	e lease period has not yet ended.
Describe	your unexpired personal property le	ases	Will the lease be assumed?
Lessor's n Descriptio Property:	name: n of leased		□ No □ Yes
Lessor's n Descriptio Property:	name: n of leased		□ No □ Yes
Lessor's n Descriptio Property:	name: n of leased		□ No □ Yes
Lessor's n Descriptio Property:	name: n of leased		□ No □ Yes
Lessor's n Descriptio Property:	name: n of leased		□ No □ Yes
Lessor's n Descriptio Property:	name: n of leased		□ No □ Yes
Lessor's n Descriptio Property:	name: n of leased		□ No □ Yes
Under pen	Sign Below halty of perjury, I declare that I have in hat is subject to an unexpired lease.	ndicated my intention about any property of my estate that se	
X /s/ A	Alisha M Scholz ha M Scholz	XSignature of Debtor 2	
Signa	March 9, 2016	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-80564 Doc 1 Filed 03/09/16 Entered 03/09/16 13:51:48 Desc Main Document Page 50 of 55

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Alisha M Scholz		Case No			
		Debtor(s)	Chapter	7		
	DISCLOSURE OF COMPE	NSATION OF ATTO	RNEY FOR D	EBTOR(S)		
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filiple rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy	, or agreed to be pa	d to me, for services rend	ered or to	
	For legal services, I have agreed to accept			1,500.00		
	Prior to the filing of this statement I have received		\$	1,500.00		
	Balance Due		\$	0.00		
2.	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3. T	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4.	have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.					
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na				firm. A	
5.	In return for the above-disclosed fee, I have agreed to r	ender legal service for all aspec	ts of the bankruptcy	case, including:		
Ì	a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, sta c. Representation of the debtor at the meeting of credit d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on ho	tement of affairs and plan which ors and confirmation hearing, a reduce to market value; ex- ons as needed; preparatior	n may be required; nd any adjourned he emption plannin	earings thereof;	ng of	
5.	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any diany other adversary proceeding.			ces, relief from stay a	ctions or	
		CERTIFICATION				
	certify that the foregoing is a complete statement of ar ankruptcy proceeding.	ny agreement or arrangement for	r payment to me for	representation of the deb	tor(s) in	
N	larch 9, 2016	/s/ David L. Stret	ch		_	
D	ate	David L. Stretch Signature of Attorno				
		The Law Office of	f David L. Stretc	h		
		5447 W. Bull Vall McHenry, IL 6005	•			
		815-578-0055 Fa	ax: 815-425-6000			
		stretchlaw@gma	il.com		_	
		name oj taw jirm				

United States Bankruptcy Court Northern District of Illinois

In re	Alisha M Scholz		Case No.			
		Debtor(s)	Chapter 7			
	VERIFICATION OF CREDITOR MATRIX					
		Number of Creditors:				
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.					
Date:	March 9, 2016	/s/ Alisha M Scholz Alisha M Scholz Signature of Debtor				

A / R Concepts 18-3 E Dundee Road Barrington, IL 60010

AFNI 1310 Martin Luther King Drive Bloomington, IL 61701

Americollect Inc PO Box 1566 Manitowoc, WI 54221

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ComEd PO Box 6111 Carol Stream, IL 60197-6111

ComEd Bill Payment Center Chicago, IL 60668-0001

ComEd PO Box 87522 Chicago, IL 60680

Consumers Coop Credit Union PO Box 9119 Waukegan, IL 60079

Consumers Credit Union 1210 S. Lake Street Mundelein, IL 60060-0503

Convergent Outsourcing, Inc. PO Box 9004 Renton, WA 98057

H & R Accounts Inc. Attention: Bankruptcy PO Box 672 Moline, IL 61265 H & R Accounts Inc. Attention: Bankruptcy PO Box 672 Moline, IL 61265

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IC Systems, Inc. 444 Highway 96 East PO Box 64378 St Paul, MN 55164

Illinois Collection Service 8231 185th Street Suite 100 Tinley Park, IL 60487

Illinois Collection Service 8231 185th Street Suite 100 Tinley Park, IL 60487

Johnsburg School District # 12 2222 W. Church Street Johnsburg, IL 60051

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Keynote Consulting 220 West Campus Drive Suite 102 Arlington Heights, IL 60004

Lakemoor Dental PC Dr. Sima Patel 28956 W. Route 120 Lakemoor, IL 60051-2215

Northwest Collectors 3601 Algonquin Road Suite 232 Rolling Meadows, IL 60008